

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740240

FILED
Jul 29, 2009
Secretary of State

Entity Name: THE HOLY CHURCH OF THE LIVING GOD REVIVAL CENTER, INC.

Current Principal Place of Business:

1700 FRANCIS AVE.
ATLANTIC BEACH, FL 322334312

New Principal Place of Business:

Current Mailing Address:

1700 FRANCIS AVE.
ATLANTIC BEACH, FL 322334312

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GOLDEN PERCY
12201 CEDAR TRACE DR SOUTH
JACKSONVILLE, FL 32246 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BATTS, HENRY
Address: 369 ROYAL PALM DR.
City-St-Zip: ATLANTIC BEACH, FL

Title: D () Delete
Name: GOLDEN, ROBERT
Address: 344 CORREYDALE COURT
City-St-Zip: JACKSONVILLE, FL

Title: VD () Delete
Name: BROWN, BRUCE
Address: 13033 EVERETT COURT
City-St-Zip: JACKSONVILLE, FL

Title: TD () Delete
Name: WILLIAMS, MARY J
Address: 670 SAILFISH DRIVE
City-St-Zip: ATLANTIC BEACH, FL

Title: PD () Delete
Name: GOLDEN, PERCY
Address: 12201 CEDAR TRACE DR S
City-St-Zip: JACKSONVILLE, FL 32246

Title: SD () Delete
Name: BERRY, CLARA
Address: 12808 HARBOR SPRINGS CT
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PERCY GOLDEN

PD

07/29/2009

Electronic Signature of Signing Officer or Director

Date